

OFICE OF
FEDERAL
PROSECUTIONS
U.S. DEPARTMENT OF JUSTICE

UNITED STATES DEPARTMENT OF JUSTICE
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
UNITED STATES IMMIGRATION COURT
NEW YORK, NEW YORK

CASE NO. 99-3451

In the Matter of:

SINGH, SURINDER,

Respondent.

In DEPORTATION Proceedings

File No.: A73-177-909

MOTION TO REOPEN

Respondent, Surinder Singh, by and through his attorneys, Mulgrew & Sassone, respectfully requests that the Immigration Judge reopen these deportation proceedings pursuant to 8 C.F.R. §§3.23(b) and 240.31 for the limited purpose of Respondent adjusting his status to that of Lawful Permanent Resident.

The Office of the District Counsel has reviewed Respondent's case and has agreed to join in respondent's motion to reopen (See letter from Assistant District Counsel Susan Egan annexed hereto.).

WHEREFORE, Respondent, through counsel, respectfully requests that the Immigration Judge reopen these deportation proceedings.

Dated: June 4, 2003

Respectfully submitted,

Mulgrew & Sassone

by:

Alexander S. Mulgrew
Attorneys for Respondent
22 South Main Street
New City, NY 10956
(845) 639-4664

DISTRIC COUNSEL
90:11:06
2003 JUN 10 AM 11:06
CS IMMIGRATION
DEPT. OF JUSTICE

2003 JUN 10 AM 11:06
90:11:06
DEPARTMENT OF JUSTICE
DISTRIC COUNSEL

U.S. Department of Homeland Security

Office of the District Counsel

26 Federal Plaza, Room 1130
New York, NY 10278
(212) 264-5916

15 May 2003

Mr. Andrew Mulgrew Esq.
22 South Main Street
New City, New York 10956

Re: Surinder SINGH File No. A73 177 909

Dear Mr. Mulgrew,

I am in receipt of your request to join in a motion to reopen, relating to the above named individual.

I have carefully reviewed the facts and note that the above named is currently in voluntary departure status. Therefore, I will join in your motion.

Very truly yours,

Susan Egan
Susan Egan
Asst. District Counsel

UNITED STATES DEPARTMENT OF JUSTICE
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AFFIRMATION IN SUPPORT

ALEXANDER S. MULGREW, an attorney duly admitted to practice before the courts of the State of New York, hereby affirms the following under penalty of perjury:

1. Mr. Singh was placed into deportation proceedings on or about March 12, 1997.

(See Exhibit B annexed hereto)

2. On August 20, 1997 Mr. Singh married Debra Ann Totani, a United States citizen. (See Exhibit C annexed hereto) On September 12, 1997, as prospective relief from deportation, Mr. and Mrs. Singh filed a petition for alien relative and application to adjust status. (See Exhibit D annexed hereto).

3. The Singhs were originally scheduled for an interview with the Non-immigrant Unit on June 3, 1998. Unfortunately, on June 2, 1998 Mrs. Singh was admitted to Nyack Hospital in Rockland County, New York due to complications with her pregnancy, and the Singh's were unable to attend their interview. (See Exhibit E annexed hereto) The Singh's daughter, Norma Lily, was born several months premature on June 4, 1998. (See Exhibit F annexed hereto). The Singh's attended their rescheduled interview on April 12, 1999.

4. On January 21, 2000 the District Director denied the petition for alien relative filed by Mrs. Singh. (See Exhibit G annexed hereto). Undersigned counsel filed an appeal of this decision on February 2, 2000. (See Exhibit H annexed hereto). At this point confusion arose and Mrs. Singh's notice of appeal was misplaced.

5. On February 2, 2000 Mr. Singh was forced by circumstances to accept a grant of voluntary departure until January 2, 2001. (See Exhibit I annexed hereto).

6. After much wrangling and additional confusion, including the filing of a second petition for alien relative and application to adjust status, this issue was resolved and on March 1, 2002 the Board of Immigration Appeals upheld Mrs. Singh's appeal. (See Exhibit J annexed hereto).

7. During the pendency of these proceedings Mr. Singh has filed several requests for an extension of the grant of voluntary departure. The District Director granted the most recent request on December 11, 2002 extending Mr. Singh's voluntary departure until ~~June 20, 2003~~^{July 21}. (See Exhibit K annexed hereto).

8. Based upon the foregoing, and in light of the fact that the Service has joined this motion to reopen, Respondent respectfully requests that this Court reopen his deportation proceedings so that they may then be terminated for the limited purpose of adjudication of his application to adjust status.

Affirmed: New City, New York
June 4, 2003

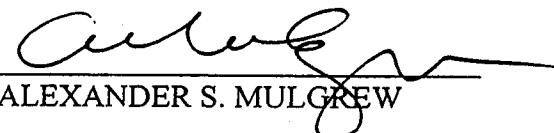

ALEXANDER S. MULGREW

EXHIBIT A



**U. S. Department of Justice
Immigration and Naturalization Service**

PRESENT THIS LETTER AT THE WORTH STREET ENTRANCE

Surinder SINGH

File Number: A29747318

9 Inwood Drive

Date: 10/17/2002

Bardonia, NY 10954

Please come to the office shown below at the time and place indicated in connection with an official matter.

OFFICE LOCATION	26 FEDERAL PLAZA NEW YORK, NY 10278	Room No. 8-800	Floor No. 8TH
DATE AND HOUR		01/29/2003	9:30:00 AM
ASK FOR	IMMIGRATION EXAMINER		
REASON FOR APPOINTMENT	ADJUSTMENT OF STATUS		
BRING WITH YOU	SEE ATTACHMENTS		

**IT IS IMPORTANT THAT YOU KEEP THIS APPOINTMENT AND BRING THIS LETTER WITH YOU.
IF YOU ARE UNABLE TO DO SO, STATE YOUR REASON, SIGN BELOW AND RETURN THIS LETTER.**

WARNING:

IF YOU CONSIDER DEPARTING FROM THE UNITED STATES TO ANY COUNTRY, INCLUDING CANADA OR MEXICO, BEFORE A DECISION IS MADE ON YOUR APPLICATION, CONSULT WITH THIS OFFICE BEFORE DEPARTURE SINCE A DEPARTURE FROM THE UNITED STATES WILL RESULT IN TERMINATION OF YOUR APPLICATION.

I am unable to keep the appointment because:

SIGNATURE	DATE
-----------	------

Attorney Name: Seskin & Sassone

Very truly yours,

Attorney Address: 22 South Main Street

New City, NY 10956-

EDWARD J. McELROY
District Director

*Fingerprint appointment forward to applicant.

EXHIBIT B

**ORDER TO SHOW CAUSE AND NOTICE OF HEARING
(ORDEN DE PRESENTAR MOTIVOS JUSTIFICANTES Y AVISO DE AUDIENCIA)**

In Deportation Proceedings under section 242 of the Immigration and Nationality Act.

(En los procedimientos de deportación a tenor de la sección 242 de la Ley de Inmigración y Nacionalidad.)

United States of America:

(Estados Unidos de América:)

File No. A-73 177 909
(No. de registro)

Dated MAR 12 1997
(Fechada)

In the matter of
(En el asunto de)

SINGH, SURINDER

(Respondent)
(Demandado)

Address
(Dirección)

9 INWOOD DR.

BARDONIA, NY 10954-0000

Telephone No.(Area Code)

000-000-0000

(Num. de teléfono y código de área)

Upon inquiry conducted by the Immigration and Naturalization Service, it is alleged that:

(Según las indagaciones realizadas por el Servicio de Inmigración y Naturalización, se alega que:)

1) You are not a citizen or national of the United States;
(Ud. no es ciudadano o nacional de los Estados Unidos)

2) You are a native of INDIA and a citizen of INDIA ;
(Ud. es nativo de) (y ciudadano de)

3) You entered the United States at or near an unknown point along the Mexican border on or about September 9, 1992 ;
(Ud. entró a los Estados Unidos en o cerca del un lugar no especificado por la frontera con Mexican el día o hacia esa fecha 9 de Septiembre 1992;)

4) You were not then inspected by an immigration officer.
(Ud. no fue inspeccionado entonces por un funcionario de inmigración)

F. Lauerrose FL.

Other Cause and Notice of Hearing

Continuation Sheet
(Hoja complementaria)Dated
(Fechada)MAR 12 1997File No. A-73 177 909
(No. de registro)Respondent SINGH, SURINDER
Demandado)

On the basis of the foregoing allegations, it is charged that you are subject to deportation pursuant to the following provision(s) aw:

según los alegatos anteriores, se le acusa de estar sujeto a deportación de acuerdo con la(s) siguiente(s) disposicion(es) de la ley:)

ction 241 (a) (1) (B) of the Immigration and Nationality Act (Act), as amended, in that you entered the United States without ection.

ción 241 (a) (1) (B) de la Ley de Inmigración y Nacionalidad (INA), según enmendada, en que Ud. entró a los Estados Unidos sin ección)

REFORE, YOU ARE ORDERED to appear for a hearing before an Immigration Judge of the Executive Office for
 gregation Review of the United States Department of Justice at:
**LO CUAL, SE LE ORDENA comparecer ante un juez de inmigración de la Oficina Ejecutiva de Revisión de Inmigración del
 rtamento de Justicia de los Estados Unidos en:**

Address 26 FEDERAL PLAZA ROOM 1000
NEW YORK, NY 10278-0000

(Dirección)

On September 3, 1997 At 9:00 AM
(Fecha)30 de Septiembre 1997 At 11 11
(Hora)

Now cause why you should not be deported from the United States on the charge(s) set forth above.

strar motivos justificantes por cual no debería ser deportado de los Estados Unidos por los cargos expresados anteriormente.)

MAR 12 1997

Signature of Issuing Officer

(Firma del funcionario que la expide)

Patricia JacksonPlace of Issuance ROSEDALE, NY

Title of Issuing Officer

(Título del funcionario que la expide)

Supervisory Asylum Officer

y Estado donde se expide)

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Judge of the Office for Review at the address provided below.
Report any changes of your address or phone number in writing to this office:
Debe presentar la Orden de Presentar Motivos Justificantes a la Oficina Ejecutiva de Revisión de Inmigración en la siguiente dirección. Debe notificar cualquier cambio de su domicilio o número de teléfono por escrito a:

The Office of the Immigration Judge
26 FEDERAL PLAZA ROOM 1000
NEW YORK, NY 10278-0000

Certificate of Translation and Oral Notice

This Order to Show Cause was was not read to the named alien in the ENGLISH language, which is his/her native language, which he/she understands.

Date Signature Printed Name and Title of Translator

Address of Translator (if other than INS employee) or office location and division (if INS employee)

If oral notice was not provided please explain)

Manner of Service	Alien's Right Thumb Print
<input checked="" type="checkbox"/> Personal Service to Alien	
<input type="checkbox"/> Certified Mail - Return Receipt Requested <input type="checkbox"/> Alien <input type="checkbox"/> Counsel of Record	

This Order to Show Cause was served by me at ROSEDALE, NY on 3-27-97
Doretha Wynter
CONTACT REPRESENTATIVE (INS)
NEW YORK ASYLUM OFFICE (ZNY)
Ficer's Signature Printed Name Title Office
Sriinder Singh.

Signer's Signature (acknowledgment/receipt of this form)
(Roma de extranjero/acuse de recibo)

Request for Prompt Hearing and Waiver of 14-Day Minimum Period (Solicitud de audiencia inmediata y renuncia al plazo mínimo de 14 días)

I request a expedite determination of my case, I request an immediate hearing, and waive my right to the 14 day notice.
(Para agilizar la decisión sobre mi caso, solicito una audiencia inmediata y renuncio a mi derecho a un plazo mínimo de 14 días.)

Nature of Respondent Date
(na del demandado) (Fecha)

EXHIBIT C

District Name TOWN OF CLARKSTOWN

New York State Department of Health

District No. 4350

Certificate of Marriage Registration

Local Register No. 423

This is to certify that the persons identified below were married on the date and at the place specified as shown by the duly registered license and certificate of marriage on file in this office

Groom Name SURINDER SINGH
 First Middle Premarriage Surname

New Surname (if applicable) _____ Check box if same as premarriage surname.

Residing at BARDONIA, CLARKSTOWN, ROCKLAND COUNTY, NY 10954

Date of Birth 07/19/1965 Place of Birth JAT SINGH WALA, INDIA
 Month Day Year City, Town or Village/State or Country

Bride Name DEBRA ANN SEVIM TOTANI
 First Middle Premarriage Surname Maiden Name
SINGH _____ Check box if same as premarriage surname.
 New Surname (if applicable) _____

Residing at BARDONIA, CLARKSTOWN, ROCKLAND COUNTY, NY 10954

Date of Birth 01/05/1961 Place of Birth NEW YORK, NEW YORK
 Month Day Year City, Town or Village/State or Country

Date of Marriage 08/20/1997 Place of Marriage CLARKSTOWN, NEW YORK
 Month Day Year City, Town or Village

Town or City Clerk

PATRICIA SHERIDAN08/22/1997

Month Day Year



Any Alteration Invalidates This Certificate
 Issued Pursuant to Section 14-a, Domestic Relations Law



EXHIBIT D

U.S.I.N.S.

FEE RECEIPT
A CENTURY OF SERVICE

09/12/97 N.Y.C.

073177909*#	
SINGH S. #	
I 485	₦ 130.00
SUPP A	₦ 1000.00
I 765	₦ 70.00
SUBTTL	1200.00
TTLAMT	1200.00
PC	70.00
PC	130.00
PC	1000.00
CHANGE	0.00

3 ITEMS

0042005 11:00

U.S.I.N.S.

FEE RECEIPT
A CENTURY OF SERVICE

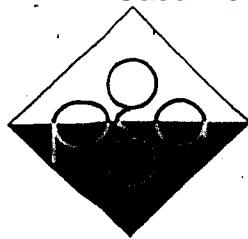
09/12/97 N.Y.C.

073177909*#	
SINGH S. #	
I 130	₦ 80.00
SUBTTL	80.00
TTLAMT	80.00
PC	80.00
CHANGE	0.00

1 ITEMS

0041005 10:58

EXHIBIT E



PERINATAL, GYNECOLOGICAL ASSOCIATES

Alex A.T. Boafo, MD / John F.J. Clark, MD / Spencer I. Ross, MD / Franklin A. Ayew, MD

June 03, 1998

To Whom It May Concern:
RE: Debra Singh

This is to certify that Ms. Singh was admitted to Nyack Hospital on June 02, 1998 at 11:30pm. Due to her condition Ms. Singh and her husband were unable to make their appointment.

If you have any questions please do not hesitate to call us at (914)353-5752.

Thank you,

*Spencer I Ross MD
John F Clark MD*

Spencer I Ross MD
John F Clark MD

EXHIBIT F

FILE

not accept this copy unless the raised seal of the Village of Nyack is affixed.
ACK, NEW YORK COUNTY OF ROCKLAND

DATED: June 29, 1998

Recorded District 4324	Register Number 783
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New York State Department of Health
CERTIFICATE OF LIVE BIRTH

State File Number

INFANT		1A. Name: First <u>Norma</u> Middle <u>Lily</u> Last <u>Singh</u>	1B. Medical Record No.: <u>750444</u>	2A. Date of Birth: <u>June 4, 1998</u>	2B. Hour: <u>08:45AM</u>
		3. Sex: <u>Female</u> 4A. Birth is: <u>Single</u> 4B. If Not Single, Birth is: <u>F</u>	5. Place of Birth: <u>Hospital</u>		
MOTHER		6A. Facility Name: <u>Nyack Hospital</u>	6B. Locality: <u>Village of Nyack</u>	6C. County of Birth: <u>Rockland</u>	7D. Social Security No.: <u>110-50-0203</u>
		7A. Maiden Name: First <u>Debra</u> Middle <u>Ann</u> Last	7B. Date of Birth: <u>Totani</u> 01/05/1961	7C. City and State of Birth: (Country if not U.S.A.) <u>New York NY</u>	8D. If City or Village, Residence Within City or Village Limits? (If no, specify town) <u>Y</u>
		8A. Residence, State: <u>New York</u>	8B. County: <u>Rockland</u>	8C. Locality: <u>Town of Clarkstown (Bardonia)</u>	8F. Zip Code: <u>10954</u>
		8E. Street and Number of Residence: <u>9 Inwood Dr</u>	8G. Mailing Address: <u>9 Inwood Dr Bardonia NY</u>	8H. Zip Code: <u>10954</u>	8I. Medical Record No.: <u>500227</u>
FATHER		9A. Name: First <u>Surinder</u> Middle <u>Efren</u> Last	9B. Date of Birth: <u>Singh</u> 07/19/1965	9C. City and State of Birth: (Country if not U.S.A.) <u>India</u>	9D. Social Security No.: <u>082-82-1749</u>
		10A. I certify that the stated information concerning this child is true to the best of my knowledge and belief. <u>Efren</u>	10B. Date Signed: <u>06/29/98</u>	10C. Name of Certifier, if not Attendant: <u>Spencer L. Ross</u>	
		10D. Attendant's Name: First <u>Efren</u> Middle <u>Oliver</u> Last	Title: <u>M.D.</u>	10E. License Number: <u>091115</u>	
		10F. Attendant's Mailing Address: <u>521 Route 304 Bardonia, NY</u>		10G. Zip Code: <u>10954</u>	
		11A. Signature of the Registrar: <u>Berta Campbell</u>	11B. Date Filed: <u>06/29/98</u>	11C. Information Added or Amended: By: <u>Berta Campbell</u>	11D. Date Amended: <u>06/29/98</u>

May the newspapers be furnished with notice of this birth?
NOTE: If yes is checked there is a consent form signed by the mother in the hospital record.

1963E (3/94)

This is to certify that the foregoing is a true copy (photocopy) of a record on file in the Office of the Registrar of Vital Statistics of the Village of Nyack, New York, County of Rockland.

Berta Campbell
Berta A. Campbell, Registrar

EXHIBIT G